



**DECLARATION FOR  
UTILITY OR DESIGN  
PATENT APPLICATION  
(37 CFR 1.63)**

Declaration Submitted with Initial Filing

Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)  
OR

Attorney Docket Number	30862.CIP
First Named Inventor	Roger Morris
<b>COMPLETE IF KNOWN</b>	
Application Number	10/799,312
Filing Date	3/12/2004
Group Art Unit	1771
Examiner Name	

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**FOOD BORNE PATHOGEN SENSOR AND METHOD**

*(Title of the Invention)*

the specification of which

is attached hereto  
OR  
 was filed on (MM/DD/YYYY) 3/12/2004 as United States Application Number or PCT International Application Number 10/799,312 and was amended on (MM/DD/YYYY) \_\_\_\_\_ (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Numbers	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES	Certified Copy Attached? NO
			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet TPO/SB/02B attached hereto.

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

## DECLARATION — Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)
10/659,222	9/10/2003	Pending

Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:  Customer Number 39313  
OR

Registered practitioner(s) name/registration number listed below.

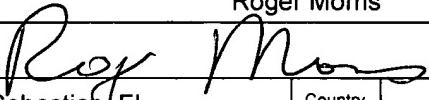
Name	Registration Number	Name	Registration Number

Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to:	<input checked="" type="checkbox"/> Customer Number or Bar Code Label <u>39313</u>	OR <input type="checkbox"/> Correspondence address below
Name	Carl M. Napolitano	
Address	Allen, Dyer, Doppelt, Milbrath & Gilchrist, P.A.	
Address	255 South Orange Avenue, Suite 1401 P.O. Box 3791	
City/State/Zip	Orlando, Florida 32802-3791	
Country	US	Telephone (407) 841-2330 Fax (407) 841-2343

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor  A petition has been filed for this unsigned inventor.

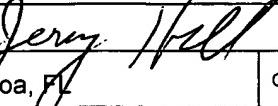
Given Name (first and middle — [if any])	Family Name or Surname		
Roger Morris			
Inventor's Signature			Date <u>7/23/04</u>
Residence	Sebastian, FL	Country	Citizenship US
Post Office Address	591 Cottonwood Road		
City/State/Zip	Sebastian, FL 32958		Country US

Additional inventors are being named on the \_\_\_\_\_ supplemental additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

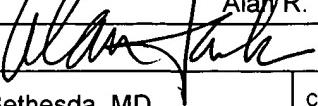
<b>DECLARATION</b>	<b>ADDITIONAL INVENTOR(S) Supplemental Sheet</b>
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<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor.		
Given Name (first and middle — [if any])		Family Name or Surname		
Galo Acosta				
Inventor's Signature	<i>Galo L. Acosta</i>		Date	7/22/04
Residence	Sebastian, FL	Country	Citizenship	US
Post Office Address	202B Keen Terrace 314 INTREPID WAY <i>(Rm)</i> 7/22/04			
City/State/Zip	Sebastian, FL 32958 MELBOURNE, FL 32903		Country	US

<b>DECLARATION</b>	<b>ADDITIONAL INVENTOR(S)</b> Supplemental Sheet
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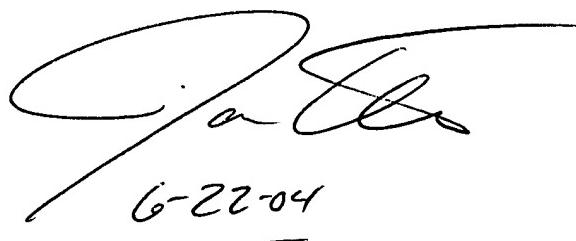
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor.		
Given Name (first and middle — [if any])		Family Name or Surname		
Jerry Hill				
Inventor's Signature			Date	7-22-2009
Residence	Cocoa, FL	Country		Citizenship US
Post Office Address	4115 Indian River Dr.			
City/State/Zip	Cocoa, FL 32927		Country	US

<b>DECLARATION</b>	<b>ADDITIONAL INVENTOR(S)</b> Supplemental Sheet
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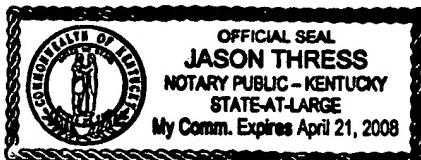
Name of Additional Joint Inventor, if any:	<input type="checkbox"/> A petition has been filed for this unsigned inventor.		
Given Name (first and middle — [if any])	Family Name or Surname		
Alan R. Tank			
Inventor's Signature			Date
Residence	Bethesda, MD	Country	Citizenship
Post Office Address	5324 Portsmouth Road		
City/State/Zip	Bethesda, MD 20816	Country	US

<b>DECLARATION</b>	<b>ADDITIONAL INVENTOR(S) Supplemental Sheet</b>
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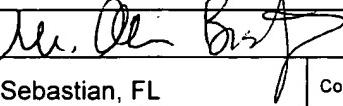
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/>	A petition has been filed for this unsigned inventor.		
Given Name (first and middle — [if any])		Family Name or Surname			
Kyle Newman					
Inventor's Signature				Date	6/22/04
Residence	Lexington, KY	Country		Citizenship	US
Post Office Address	2301 Maggard Drive, #105				
City/State/Zip	Lexington, KY 40511		Country	US	



6-22-04

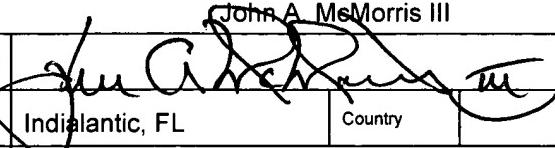


<b>DECLARATION</b>	<b>ADDITIONAL INVENTOR(S) Supplemental Sheet</b>
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<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor.		
Given Name (first and middle — if any))		Family Name or Surname		
Alan Bishop				
Inventor's Signature			Date	July 22 2004
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City/State/Zip	Sebastian, FL 32958	Country		

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DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet
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Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor.		
Given Name (first and middle — [if any])		Family Name or Surname		
John A. McMorris III				
Inventor's Signature			Date	7/26/04
Residence	Indialantic, FL	Country	Citizenship	US
Post Office Address	542 Sanderling Drive			
City/State/Zip	Indialantic, FL 32903	Country	US	